



American Endowment Foundation

Donor Advised Fund Change Form

Current Donor Contact Information

Check here if contact information does not change Check here if new contact information and fill in below

First Name		Last Name	
Fund Name			Fund ID
Email		Phone	
Address			
City	State	Zip Code	

Please select one choice below (ADD or REMOVE):

<input type="checkbox"/> ADD	<input type="checkbox"/> AUTHORIZE GRANTING PRIVILEGES	<input type="checkbox"/> REMOVE (terminate all fund access)
<input type="checkbox"/> Donor-Advisor	<input type="checkbox"/> Financial Advisor	<input type="checkbox"/> Committee Member
<input type="checkbox"/> Successor Advisor	<input type="checkbox"/> Committee Spokesperson	<input type="checkbox"/> Interested Party

NOTE: If removing financial advisor, must add new financial advisor in next section.

First Name		Last Name	
Company		Job Title	
Relation to Donor	Email		
Address			
City	State	Zip Code	Phone

<input type="checkbox"/> ADD	<input type="checkbox"/> AUTHORIZE GRANTING PRIVILEGES	<input type="checkbox"/> REMOVE (terminate all fund access)
<input type="checkbox"/> Donor-Advisor	<input type="checkbox"/> Financial Advisor	<input type="checkbox"/> Committee Member
<input type="checkbox"/> Successor Advisor	<input type="checkbox"/> Committee Spokesperson	<input type="checkbox"/> Interested Party

First Name		Last Name	
Company		Job Title	
Relation to Donor	Email		
Address			
City	State	Zip Code	Phone

Change Fund Name to the following:

OLD Fund Name
NEW Fund Name

NOTE: Must have either Successor Advisor or Disposition Plan, but not both.

Change Fund Disposition Plan to the following:

I/We recommend the Fund to continue on and making grants annually to the following charitable organizations (please describe / attach additional information if needed)

I/We recommend the Fund to terminate and the proceeds be granted to the following charitable organizations (please describe / attach additional information if needed)

I/We recommend the following customized disposition plan for the fund (please describe / attach additional information if needed)

Signature(s) (Must be signed by each Donor-Advisor on fund)

Donor-Advisor Signature	Date
-------------------------	------

Donor-Advisor Signature	Date
-------------------------	------

Please remit to AEF
American Endowment Foundation
5700 Darrow Road, Suite 118 - Hudson, OH 44236
donorchanges@aefonline.org / 888-440-4233 / 330-656-2063 fax